PTO/SB/21 (09-04)
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TRANSMITTAL FORM

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Total Number of Pages in This Submission

Application Number Patent # 5,663,496 Filing Date Issued: September 2, 1997 First Named Inventor RECEIVED Michael HANDFIELD Art Unit 2214 MAR 2 0 2006 Examiner Name W. L. Oen OFFICE OF PETITIONS Attorney Docket Number

555642001400

ENCLOSURES (Check all that apply)					
Fee Transmittal Form (1 page, plus duplicate for fee processing)	Drawing(s)	After Allowance Communication to TC			
Fee Attached	Licensing-related Papers	Appeal Communication to Board of Appeals and Interferences			
Amendment/Reply	X Petition (2 pages)	Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)			
After Final	Petition to Convert to a Provisional Application	Proprietary Information			
Affidavits/declaration(s)	X Power of Attorney, Revocation Change of Correspondence Address (2 pages)	Status Letter			
Extension of Time Request	Terminal Disclaimer	X Other Enclosure(s) (please Identify below):			
Express Abandonment Request	Request for Refund	Petition Fee Transmittal (1 page, plus duplicate for fee processing);			
Information Disclosure Statement	nformation Disclosure Statement CD, Number of CD(s)				
Certified Copy of Priority Document(s)	Landscape Table on CD	in Issued Patent (2 pages); Request for Certificate of Correction (2 pages); Certificate of Correction (1 page); Return Receipt Postcard			
Reply to Missing Parts/ Incomplete Application	Remarks				
Reply to Missing Parts under 37 CFR 1.52 or 1.53	Customer No. 25225				
SIGNATI	URE OF APPLICANT, ATTORNEY, OF	RAGENT			
Firm Name MORRISON & FOE	RSTER LLP				
Signature	Lil .				
Printed name Daniel N. Kannuzai					
Date March 10, 2006	Reg. No.	36,727			

12

I hereby certify that this correspondence is being deposited with the U.S. Postal Service with sufficient postage as First Class Mail, in an envelope addressed to: Attention: Certificate of Correction Branch, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on the date shown below. Signature: Dated: March 10, 2006 (Cindy Guido)

sd-305596

PTO/SB/17 (12-04v2)
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Effective on 12/08/2004. Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).		Complete if Known			
		Application Number	Patent # 5,663,496		
FEE TRANSI	MITTAL	Filing Date	Issued: September 2, 1997		
For FY 2005 X Applicant claims small entity status. See 37 CFR 1.27		First Named Inventor	Michael HANDFIELD W. L. Oen		
		Examiner Name			
		Art Unit	2214		
TOTAL AMOUNT OF PAYMENT	(\$) 100.00	Attorney Docket No.	555642001400		

METHOD OF PAYMEN	IT (check all t	hat apply)						
Check Credit Card Money Order None Other (please identify):								
x Deposit Account Number: 03-1952 Deposit Account Name: Morrison & Foerster LLP								
For the above-iden			-		ed to: (check	all that apply)		
) indicated be	-		<u> </u>	•	cated below, ex	cept for th	ne filina fee
		s) or underpay	ment of		any overpay			
fee(s) under	37 CFR 1.16			X Cledit	ariy overpay			
FEE CALCULATION								
1. BASIC FILING, SEARC	•	MINATION FE		CH EEEC	EVALUNIA	TION EEEO		
	FILIN	Small Entity	SEAR	CH FEES Small Entity	EXAMINA	ATION FEES Small Entity		
Application Type	Fee (\$)	Fee (\$)	Fee (\$)	Fee (\$)	Fee (\$)	Fee (\$)	Fees P	aid (\$)
Utility	300	150	500	250	200	100		
Design	200	100	100	50	130	65		
Plant	200	100	300	150	160	80		
Reissue	300	150	500	250	600	300		
Provisional	200	100	0	0	0	0		
2. EXCESS CLAIM FEES								Small Entity
Fee Description							<u>Fee (\$)</u>	<u>Fee (\$)</u>
Each claim over 20 (include	-						50	25
Each independent claim or	•	ig Reissues)					200	100
Multiple dependent claims	1						360	180
	Claims F	ee (\$)	Fee Pai	d (\$)		tiple Depende		
- 64 =	×	= _			<u>Fee</u>	<u>(\$)</u> <u>F</u>	ee Paid (\$	1
Indep. Claims Extra	Claims F	ee (\$)	Fee Pal	d (\$)				_
- 10 =	` ×	= _						
3. APPLICATION SIZE FE								ļ
If the specification and di								
listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).								
	xtra Sheets		• •	itional 50 or frac	tion thereof	Fee (\$)	Fee F	Paid (\$)
- 100 =		/50		ound up to a who				
4. OTHER FEE(S)		,	`				Fees I	Paid (\$)
Non-English Specificat	ion, \$130 fe	e (no small en	tity discour	nt)				
Other (e.g., late filing sorcharge):								
/	1/ 18	11 Certificat	of corre	ction			100.00	
SUBMITTED BY	1	1						
Signature	1			egistration No. tomey/Agent)	36,727	Telephone	(858) 720)-5100
Name (Print/Type) Daniel N	. Yannuzzi					Date	March 10), 2006

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